PATENT APPLICATION FEE DETERMINATION RECORD

Application or Docket Number

Effective October 1, 2003								10829332					
CLAIMS AS FILED - PART I (Column 1) (Column 2).								SMALL ENTITY TYPE			OTHER THAN OR SMALL ENTITY		
TOTAL CLAIMS			18					RATE	FEÈ	1	RATE	FEE	
FOR			NUMBER FILED		NUMBER EXTRA			BASIC FEE	385.00	OR	BASIC FEE	770.00	
TOTAL CHARGEABLE CLAIMS			/ Sminus 20=		.0			X\$ 9=		OR	X\$18=		
INDEPENDENT CLAIMS					4			X43=	•	OR	X86=	344	
ML	LTIPLE DEPEN	NDENT CLAIM P	RESENT					+145=		OR	+290=		
• If	the difference	in column 1 is	less than zero, enter "0" in column 2			column 2		TOTAL		OR	TOTAL	1114	
CLAIMS AS AMENDED - PART II (Column 1) (Column 2) (Column 3)						<u>.</u>	SMALL	ENTITY	OR	OTHER SMALL			
AMENDMĘNT A		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUMI PREVIO PAID	BER DUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total	. 18	Minus	-2	Q	8		X\$ 9=		OR	X\$18=		
	Independent	+ 2	Minus	SENDENT	CI AINA	=		X43=	•	OR	X86≖		
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM								+145=		OR	+290=		
·								TOTAL ADDIT, FEE		OR	TOTAL ADDIT, FEE		
(Column 1) (Column 2) (Column 3)													
AMENDMENT B		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUMI PREVIO PAID I	BER	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total	*	Minus	•••				X\$ 9=		OR	X\$18=		
	Independent	*	Minus	##	CL AINA	<u> - </u>		X43=		OR	X86=		
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							, [+145=		OR	+290=	•	
							-	TOTAL ODIT, FEE	·	OR	TOTAL ADDIT. FEE		
(Column 1) (Column 2) (Column 3)									٠.			•	
AMENDMENT C		CLAIMS REMAINING AFTER AMENDMENT	٠	HIGHI NUME PREVIO PAID I	BER .	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total	•	Minus	1010		= .	lſ	X\$ 9=		OR	X\$18=		
	Independent	•	Minus	***		•		X43=	- 5	OR	X86=		
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM												
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.								+145=		OR	+290=		
"If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." ADDIT. FEE ""If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."									····	OR ,	TOTAL ODIT. FEE		
		iber Previously Pai					er tous	nd in the app	ropriate box	in cot	ımn 1.	٠	